To the	FDA:	YOU ARE	F Suppose	NEEDS	WORK OF TO	FOR	
	RE: DOCKE	ET NO. 98N-1	265	U.S.	CITIZE.	NS	
I send t of the I	his letter as a co Memorandum o	onsumer of head of Understand	althcare service	es to register	my concern	and dicame	was in I
uon Ac	resent form, the et, severely resists from the pro-	tricts the righ	its of the phys	icians and r	patients to of	itain healt	heare

pharmacists to serve the public's medical needs. As a peathcar? Possible increased by no restrictions to the delivery of a compounded medication prescribed for me, regardless of where I may live or may travel. The MOU must be amended!

Signed:

State of Residence:

State of Residence:

The Mount of Thomas

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Anestin the state of Thomas.

PLEME DO NOT

RESTRICT MY RIGHT TO OBTANI WHAT

C4245

MRS. RITA BERNSTEN

10754 SHORE DR

BOLA PATON FL

33428



DOCKETS MANAGEMENT BRANCH (HFA-305) FOOD AND DRUG ADMINISTRATION 5630 FISHERS LN RM 1061 ROCKVILLE MD 20857-0003